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DECLARATION FOR PATENT APPLICATION & POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

AUTOMATED DELIVERY OF TREATMENT FIELDS

	ion of which was filed nded on	l on July 20, 2001 as Application S (if applicable)	Serial No. : 09/909,589		
Inventors:	Michelle Marie Sva	atos and William F. Collins			
	•	eviewed and understand the conte ne claims, as amended by any am			
I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.					
		ity benefits under Title 35, United nt or inventor's certificate listed be			
		ation for patent or inventor's certifi hich priority is claimed:	cate having a filing date		
before that of		hich priority is claimed:	cate having a filing date		
before that of	the application on w	hich priority is claimed:			

I hereby claim the benefits under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a)

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which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing date)	(Status) (patented,pending,abandoned)
(Application Serial No.)	(Filing date)	(Status) (patented,pending,abandoned)
i hereby claim the benefit ur below:	nder 35 U.S.C. §119(e)	of any United States provisional application listed
(Application Serial No.)	(Filing date)	(Status)

<u>Power of Attorney</u>: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

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I hereby declare that all statements made herein on my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the State Code and that such willful false statements may jeopardize the validity of the application or

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any patent issuing thereon.

Full name of first joint inventor:	Michelle Marie Svatos
Inventor's signature:	Michelle place Sados
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